



FEB 27 2006 11:09AM

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NO. 8209 P. 1

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1933 7590 12/01/2005

FRISHAUF, HOLTZ, GOODMAN & CHICK, PC  
 220 5TH AVE FL 16  
 NEW YORK, NY 10001-7708  
 02/27/2006 HDEMESS2 00000051 10641352

01 FC:1501 1400.00 0P  
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B. VILLANI	(Depositor's name)
<i>B. Villani</i>	(Signature)
VIA FAX 2/27/06	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/641,352	08/13/2003	Junichi Ishibashi	03482/LH	1190

TITLE OF INVENTION: CELLULAR PHONE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/01/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
KIM, WESLEY LEO	2688	455-566000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. FRISHAUF, HOLTZ,  
 GOODMAN & CHICK,  
 P. C.  
 2.  
 3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Olympus Optical Co., Ltd.

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1378 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Leonard HoltzDate 2/27/06Typed or printed name Leonard HoltzRegistration No. 22,974

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